

The Rhode Island Primary Care Trust

Innovation. Collaboration. Inspiration.

*Making Rhode Island The Healthiest
State in the Nation*

Michael Fine, MD

Director

Rhode Island Department of Health

August 20, 2013



Why The Rhode Island Primary Care Trust?

- Public Health Opportunities

- 150,000-200,000 remaining smokers
- 1200 unnecessary deaths a year from heart disease and stroke
- 200 unnecessary deaths a year from colon cancer
- 80 unnecessary new cases of HIV
- More than 1300 kids born to teenagers -- mostly in Central Falls, Pawtucket, Woonsocket, and West Warwick
- 150-300 deaths a year from prescription and other drug overdoses
- An infant mortality rate twice what it should be
- 300 to 400 avoidable deaths from influenza (500,000 Rhode Islanders UNIMMUNIZED)
- The highest unemployment rate in the US, and rapidly growing income inequality.

- The unaddressed denominator

- 20-25 percent of all Rhode Islanders have no usual source of care
- 12.3 percent of All Rhode Islanders have not had seen a doctor in the last year because of cost
- 32,000 Rhode Islanders have undiagnosed diabetes (15,000 not treated to goal)
- 80,500 Rhode Islanders have undiagnosed hypertension (64,000 not treated to goal)



Why The Rhode Island Primary Care Trust?

- Critical (and expensive) systemic medical care failures
 - 44 percent of Emergency Department utilization is ambulatory sensitive
 - Emergency Department utilization is growing at 5-10 percent a year
 - And most ambulatory sensitive ED utilization occurs between 11 am and 2 pm
 - 11 percent of hospital admissions are ambulatory sensitive
 - 20 percent of hospitalized Medicare patient are readmitted in 30 days
 - A majority of EMS transports in rural areas are to transport Elderly patients who fall and can't get up
 - A majority of EMS transports in urban areas are for substance abuse issues, and no effective treatment is provided in the Emergency departments on transport by EMS
- There are NO local health departments in Rhode Island
- So NO local advocacy for
 - Smoking cessation policy at the town level
 - Exercise programs at the town level
 - School exercise programs with local boards of education
 - Locally based substance abuse policy and treatment
 - Home safety and case management
 - Firearms safety and control at the town level
 - Lead abatement at the town level.....



Why The Rhode Island Primary Care Trust?

- 97 percent of our health care spending is on medical care
 - Of which 30-40 percent is unnecessary, dangerous or fraudulent
- WHILE the major determinates of public health are social
- AND the only medical service associated with improved outcomes AND lower costs is primary care.
- ***The only practical way to improve the health and safety of all Rhode Islanders is to provide robust primary care to ALL Rhode Islanders in ALL Rhode Island communities.***



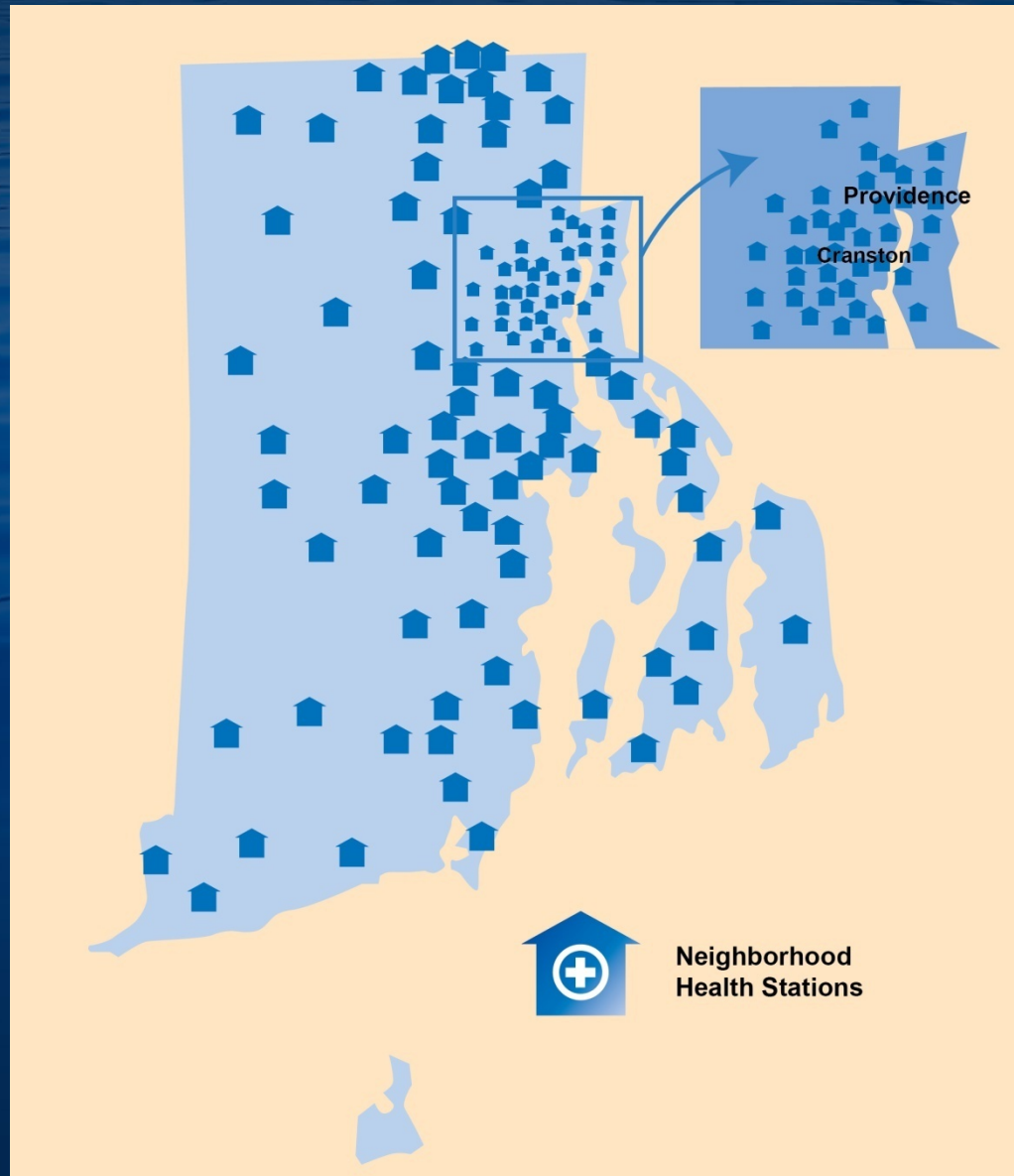
What Kind of Primary Care?: Neighborhood Health Stations

- **Multidisciplinary**
 - Doctors, nurse practitioners, nurses, pharmacists, physical therapists, psychologists, social workers, dentists, substance abuse counselors, nutritionists, and lay midwives, community health workers, health nurses and aides, EMTs, paramedics
 - Practicing as *a team*
- **Local**
 - One for every community of 10,000 to 15,000 people
 - practicing as *a team*
 - Taking care of *a community*
- **Appropriately resourced via capitation**
- **Open Access**
 - Open 8am - 8pm and weekends
- **Population Focused**
 - Provides 90% of the health services every community needs
 - Provides care so that 90% of the people in every community uses their local Neighborhood Health Station.



The Rhode Island Primary Care Trust:

Neighborhood Health Stations



The Rhode Island Primary Care Trust: Neighborhood Health Stations:

- Capitated Payment Domains
 - Open Access
 - Breadth of Service
 - QA/QI for Public Health Measures
 - Population Penetration

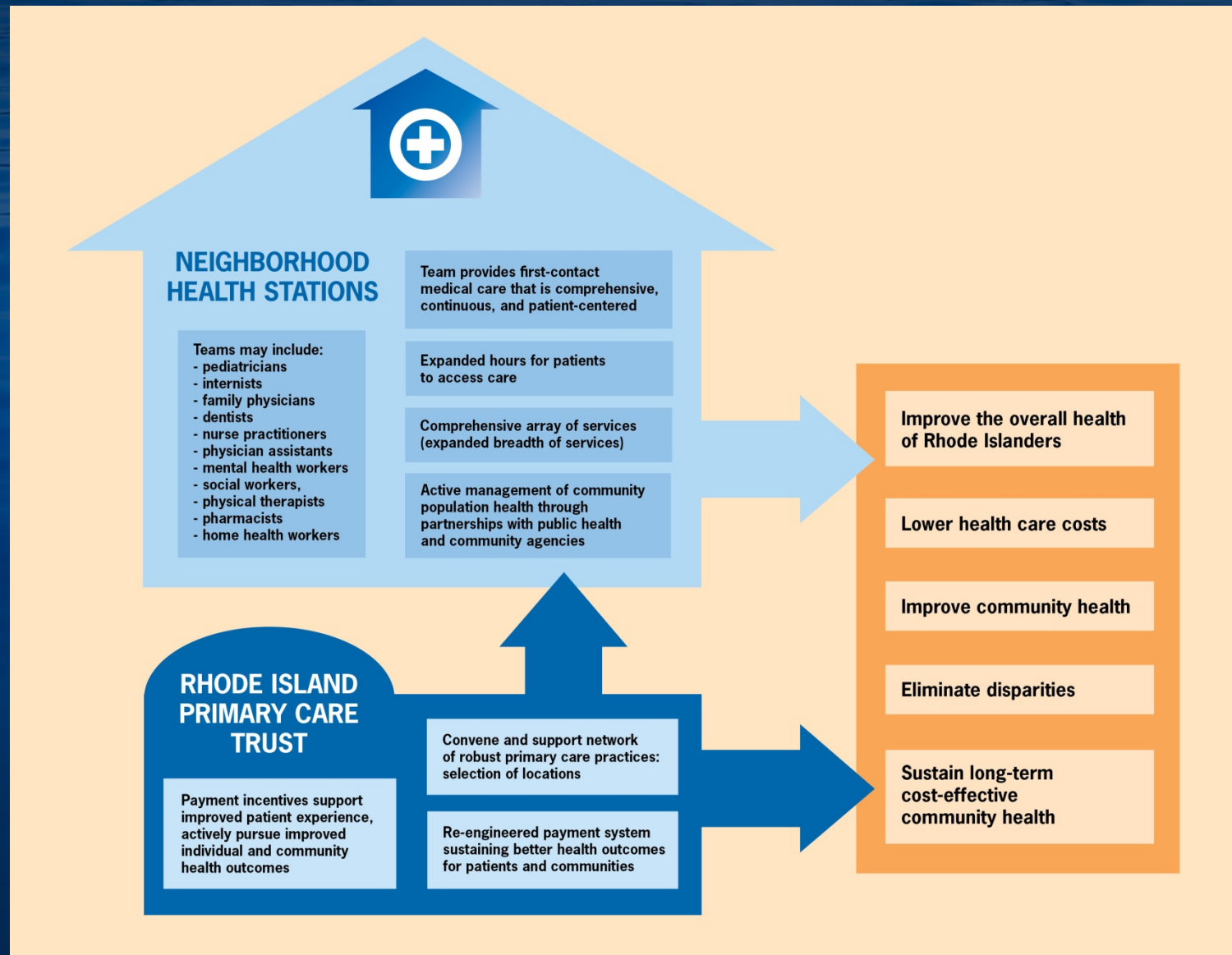


What is **The Rhode Island Primary Care Trust?**

- **A Non Profit or a Quasi-Public** that
 - **Redirects primary care funding in Rhode Island**
 - Superhighway to primary care capitation
 - Builds on the success of CSI RI
 - **Builds primary care infrastructure in Rhode Island**
 - One robust multi-disciplinary Neighborhood Health Station for every Rhode Island community
 - Building on the experience and effectiveness of community health centers and larger primary care practices
 - **A Rhode Island Innovation**
 - Not the UK Primary Care Trust
 - Bears only primary care risk – and leaves the Rhode Island health insurance system, the health insurance exchange, and Rhode Island Insurers intact AND leaves the management of full risk to others
 - Focused on building out the primary care infrastructure so that we provide
 - primary care to all Rhode Islanders
 - a new community resource to all Rhode Island communities.



The Rhode Island Primary Care Trust: Overview



What is **The Rhode Island Primary Care Trust?**

- *Substantial savings. Projected population health improvements.*
 - WelMed (Texas)
 - CSI Rhode Island
 - North Carolina Medicaid
 - Hundreds of PCMH demonstrations
 - **Why? Because of the Value Leverage of primary care**
 - Right time, right place, right size, care that is already affordable
 - Brings the *value* of prevention to 30 to 50 percent of Rhode Islanders who do not get the preventative services that produce better health outcomes
 - Brings **incredible primary care access** to **all** Rhode Islanders
 - » Reduced emergency room utilization
 - » Reduced hospital utilization
 - » Reduced unnecessary care and overtreatment
 - » Cutting edge chronic disease management cost savings



The Rhode Island Primary Care Trust: What about choice?

- Must preserve patient choice of
 - Physician
 - Neighborhood Health Station
 - Specialist
 - Hospital
- Must preserve physician choice of
 - Location
 - Reimbursement process
 - Specialist
 - Hospital
- Must preserve community choice
 - About whether or not to participate
- **The Health Information Exchange *must* be robust and effective for this much choice to work.**



The Rhode Island Primary Care Trust: What's in it for Patients

- *Your doctor* with the time and support
 - She or he needs to *listen to you*
- World class technology, at *your* finger tips,
 - In *your* neighborhood
- Medical care when and where you need it
 - From *your doctor*
- Many more medical and other services
 - Directed by *your* doctor
 - In *your* community
- Everyone involved in *your* care
 - Talking to each other
 - Coordinated and directed by *your* doctor
- A not-for-profit health care system *for you*
 - *Instead of a market driven mess*
- The Rhode Island Primary Care Trust: **Making Rhode Island the healthiest state in the Union.**



The Rhode Island Primary Care Trust:

What's in it for Primary Care Physicians

- Stable, secure, predictable income
- Capital and technical support for those who wish to expand
- Resources to address the public purpose of primary care
- Resources for team building
- Improved lifestyle
- The end of fee for service billing for those who choose capitation
- Simplified billing for those who choose fee for service
- The potential to acquire equity interest in a sustainable business
- Recruiting: if we build it, they will come
- The Rhode Island Primary Care Trust: **Making Rhode Island the healthiest state in the Union.**



The Rhode Island Primary Care Trust:

What's in it for Primary Care Organizations ?

- Stable, secure, predictable cash flow
- Capital, planning and technical support for expansion to new sites
- Resources to address the public purpose of primary care
- Resources and technical assistance for multidisciplinary team building
- The end of fee for service billing for those who choose capitation
- Simplified billing for those who choose fee for service
- The freedom to organize and manage care and take fuller or full risk for those organizations that wish to be risk bearing.
- **Recruiting:** if we build it, they will come

The Rhode Island Primary Care Trust: **Making Rhode Island the healthiest state in the Union.**



The Rhode Island Primary Care Trust: What's in it for Specialists?

- **Case Finding and Patient “packaging”**
- **Stable referral base**
- **The Catcher's Mitt:**
 - community management of patients with complex disease
 - Reduced on call volume
- **Collaborators in the triple aim:**



**Making Rhode Island the healthiest
state in the Union.**



The Rhode Island Primary Care Trust: What's in it for Hospitals?

- Case Finding
- Capitalization and secure funding for the primary care base
- The Catcher's Mitt:
 - community management before admission and after discharge
 - reduction of readmissions
- Collaborators in the triple aim:
Making Rhode Island the healthiest state in the Union.



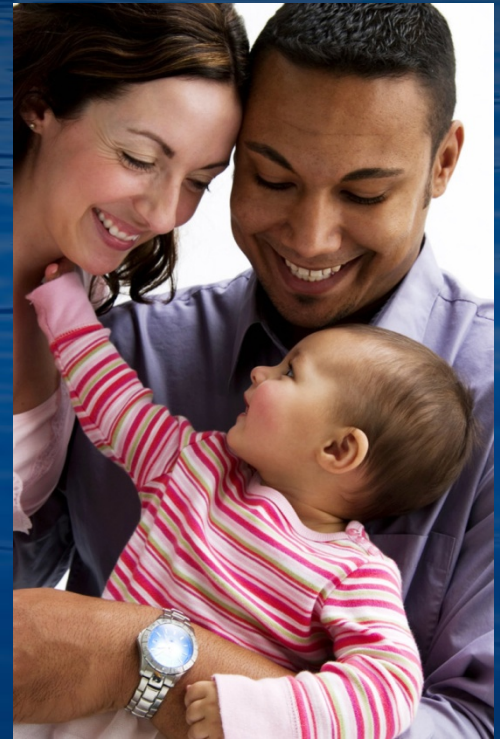
The Rhode Island Primary Care Trust: What's in it for health insurers?

- **No more primary care claims processing**
- **Reduced cost growth means more affordable**
- **health insurance means a stable customer base**
- **The Catcher's Mitt:**
 - Robust prevention that is community based
 - Robust team-based management of chronic disease
 - community management before admission and after discharge
 - reduced readmissions
- **Collaborators in the triple aim:**
Making Rhode Island the healthiest state in the Union.



The Rhode Island Primary Care Trust: **What's in it for Rhode Island?**

- **Improved Health Outcomes**
 - Reduce deaths from Heart Disease and Stroke by 1200 deaths a year
 - Reduce deaths from Colon Cancer by 200 deaths a year
 - Reduce new cases of HIV by 80-100 new cases a year
 - Cut infant mortality in half
 - Reduce and eliminate teenage pregnancy
 - End prescription opioid overdose death
- **Reduced health insurance cost**
- **Reduce days of lost work and school**
- **Reinvigorate Rhode Island's economy**



The Rhode Island Primary Care Trust:

Strategy and Timing : *Collaboration*

- **Work Plan focused on 2015-2020**
- **2013:**
 - Legal analysis/ work with Congressional Research Service and the Aspen Institute
 - CMMI and RIF Strategy Grants (applied for)
 - General Assembly Study Commission
 - Collaboration with State Innovation Module
- **2014**
 - Authorizing legislation, if needed
 - Begin Trust formation
 - First 3 to 5 neighborhood Health Station Demonstration sites (conversion of existing practices and CHCs)
- **2015 and 2016**
 - Create Primary Care Trust
 - Contract with existing practices or practice groups
 - Complete population analysis for Neighborhood Health Stations
 - Contract with TPA for capitation and fee for service
- **2016 or 2017**
 - Primary care fundholding begins
- **2016-2020**
 - Build out Neighborhood Health Stations



The Rhode Island Primary Care Trust:

Let's get real: politics and probability

- *Building a Wave: Iterative Collaboration*
- **Leadership developmental space:**
 - **FOCUS**
 - Business Community
 - Primary Care Community
 - Specialist Community
 - Hospital Community
 - Insurers
 - **Retooled and refocused Rhode Island Department of Health**
 - *POLICY STAFF AND WORK GROUP*
 - CDC fellow/CDC policy support
 - Independent 501C3 with VOLUNTEERS (AS220 and others)
 - **Help or Support from CDC, IBM, AS220, RI Council of Churches, Rhode Island Public Health Institute, Herndon Alliance**
 - **Paul Grundy MD, David Satcher MD , The Robert Graham Center, and many others around the country**



The Rhode Island Primary Care Trust: What's today's ask?

Support for 2-3 Neighborhood Health
Station conversions in the SIM application

Support of the General Assembly
Study Commission

- **Advice and input**



The Rhode Island Primary Care Trust: Advice Input and Shaping

- **Primary Care Trust**
 - Non Profit or Quasi-Public?
 - Governance?
- **Neighborhood Health Stations**
 - Ownership?
 - Governance?
 - Professional composition?
 - Size?
 - Location?
- **Timeline and Glide path**



The Rhode Island Primary Care Trust:

Innovation. Collaboration. Inspiration.

Yes, we *can*
do this!



And we can do this TOGETHER

- Learning from our successes
- Building on our relationships

**Together, we *can* make Rhode Island
the healthiest state in the Union.**



The Rhode Island Department of Health:

Five Things Every Rhode Island Physician Can Do To Make Rhode Island The Healthiest State in the Union

- **Choose Wisely**
 - Prescribe nothing unnecessary
 - Especially opioids and antibiotics
 - Share decision making with patients and families
- **Ask Every Patient to Stop Smoking**
 - And to tell friends and family to stop
- **Listen**
 - For substance abuse and depression
- **Practice Prevention**
 - At every visit
 - With every phone call
- **Open Health Connections every month**
 - And check out Public Health Grand Rounds monthly

